200	1 UNIFORM BUSI	NESS REPO	RT (UBR)	· ·			
DOCUMENT # P99000097993 1. Entity Name International Yacht Refinishing. Inc.					FILED \		
Grissian Dis	ne of Programs 1	Mailing Address			01 MAR -9	PH 2: 22	
	ni, FI 33127	Mailing Address 746 NW 3 Migmi, F		SECRETARY OF STATE TALLAHASSEE. FLORIDA			
2. Principal F	Place of Business	3. Mailing Address			.1.		
Suite, Apt. #, etc. Suite, Apt. #, etc.				-00-0	T WRITE ST	CE .	
City & State		City & State		4. FEI Number 095	59706	Applied For Not Applicable	
Zıp	Country	Zıp	Country	5. Certificate of Status D	esired 🗇 \$8	3.75 Additional e Required	
Almia	6. Name and Address of Current Re	gistered Agent	Name	7. Name and Address o	f New Registered Age	ent	
alejandro Bautista 746 NW 322 Street				Street Address (P.O. Box Number is Not Acceptable)			
Miami, Fl 33127							
11114	HILL COLL		City	<u> </u>	FL	Zip Code	
8 The above	e named entity submits this statement for t	ne nurnose of changing its	registered office or rec	nistered agent, or both, in the Sta			
SIGNATURE	Snaturation of printed name of registered agent and	title il applicable. (NOT	E. Registered Agent signature re	squired when reinstating)	DAJE	-	
Tax filing o	oration is eligible to satisfy its Intangible requirement and elects to do so. ria on back)	After MAY 1, 20	II FEE IS \$150.00 01 Fee will be \$550 die to Department of	.00 Trust Fund Cor	· · · -	\$5.00 May Be Added to Fees	
11.	OFFICERS AND D		12.	ADDITIONS/CHANGES	···		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	alejandro Bautist 146 NW 32ª otree Miami, Fl 33127	☐ Delete +	NAME STREET ADDRESS CITY-ST-ZIP	500	- 003850 03/13/010	Change Addition	
fitti 6	VD alexander Bautiste	☐ Delete	TITLE] capata * 30 (April 194)	
HAME STREE1 ADDRESS CHTY-ST-ZIP	MI AW 32 Shreet	•	STREET ADDRESS CITY-ST-ZIP				
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			Change Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			Change Addition	
		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	ų'	LS	Change Addition	
TITLE NAME STREET ADDRESS		□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		, –	Change Addition	
STREET ADDRESS CITY-S1-ZIP TITLE NAME STREET ADDRESS CITY-S1-ZIP 13. hereby condicated	certify that the information supplied with the on this report or supplemental report is to poration or the receiver or trustee empower, or on an attachment with an adoless, with	is filing does not qualify for ue and accurate and that r	STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP the exemption stated by signature shall have	the same legal effect as if made	tatutes. I further certify under oath; that I am a	Change Addi	

2017

Division of Corporations P.O. BOX 6327 Tallahasse, Fl 32314

Per instructions from Division of Corporations, I am attaching a check in the amount of \$300.00 for the annual reports fee with my application.

I also state that I have not received any notice from the Division of Corporations in respect with my corporation INTERNATIONAL YACHT REFINISHING, INC. Thank you for your courtesy in this matter.

ALEJANDRO BAUTISTA

PRESIDENT